Gestalt therapy came to prominence and flourished during the North American human potential movement of the 1960s, and will probably always be associated with that historical period and the flamboyant Frederick (Fritz) Perls. After cowriting the seminal *Gestalt Therapy: Excitement and Growth in the Human Personality* (Perls, Hefferline, & Goodman, 1951) with Robert Hefferline and Paul Goodman, Perls spent the rest of his life establishing gestalt training centers and leading gestalt workshops. Indeed, most of his writings from then on were actually transcriptions of his workshops. He became the archetype of the charismatic, flawed psychotherapeutic guru practicing during invigorating times.

Gestalt therapy’s notoriety has certainly declined with Perls’s death in 1970 and the loss of his dramatic presence. Few, if any, can name an important writer in the field beyond Perls. Yet it may have been the passing of the wide-eyed optimism that characterized the era
that has left gestalt therapy feeling so dated today. In the words of Erving and Miriam Polster (1973):

To say that gestalt therapy is a temporary truth does not mean that [it] . . . will no longer be true 40 years from now. Rather, 40 years from now what we are teaching may be a stale way to look at life then. (p. 6)

Almost 40 years later (36 to be exact), at the 2009 Evolution of Psychotherapy Conference, Erving Polster presented a live clinical demonstration to an audience of at least 1,000 eager psychotherapists (Milton H. Erickson Foundation, 2009). The powerfulness of that therapeutic encounter was palpable to those in attendance, and many were crying and laughing along with the client. When the demonstration was finished and Polster left the stage, he was mobbed like a rock star. Did gestalt therapy feel dated to those audience members? I sincerely doubt it. Would most like a guide to gestalt practice in order to be able to replicate what they experienced? I am certain of it.

Philip Brownell states in his preface that he wrote *Gestalt Therapy: A Guide to Contemporary Practice* because he wanted to put into print the ideas that he had been discussing on a gestalt electronic mailing list, explore some new ideas that he had been considering, and educate people who are unfamiliar with gestalt therapy. I am not a member of the mailing list that Brownell frequents, so I can’t comment on whether he accurately represents the ideas discussed there, and I don’t know whether his personal exploration of new ideas was fruitful for him. I can say that the fulfillment of his goal of educating people unfamiliar with gestalt therapy is desperately needed.

Unfortunately, this need is unlikely to be met with this book. I honestly can’t imagine anyone new to gestalt therapy reading past the first few chapters. Despite the author’s claim that he tried to keep jargon to a minimum, this book is very dense with terminology. I daresay that even those who have experienced the power of gestalt therapy could be deterred.

I have taught theories of psychotherapy for over a decade and am always looking for a book that describes the practice of gestalt therapy in a manner congruent with the current zeitgeist. Perls et al. (1951) and *Gestalt Therapy Integrated* (Polster & Polster, 1973), as good as they are, are couched in language and contemporaneous references that have indeed grown stale. I find that today’s therapists in training consider gestalt therapy to be as out of date as psychoanalysis.

Of course, it needn’t be this way. Just as writers like Nancy McWilliams (2004) are able to meld current ideas and sensibilities with the psychoanalytic worldview, the same could be done for gestalt therapy. However, *Gestalt Therapy: A Guide to Contemporary Practice* does not achieve this goal. Whereas the book may represent the contemporary thinking of a committed group about gestalt theory, it does not speak to the experience of present-day practitioners who might otherwise be quite interested in gestalt therapy.
In fairness to Brownell and others like him who have tried to write a guide to the practice of gestalt therapy, what makes it so devilishly difficult to do is that gestalt therapy is based on immediate experience. The challenge is how to capture in words—to say nothing of theory—the unique evidence that experience provides.

During the class each semester when I teach gestalt therapy, I invariably struggle to explain it in words and theory, and the students struggle along with me to understand. The portion of the class devoted to providing a live demonstration with a volunteer, however, never fails to be the most significant event of the term. And I do not consider myself primarily a gestalt therapist (although I am a humanist), much less an expert. Again, in the words of the Polsters, “[Gestalt therapy’s] major premise is that the therapeutic experience is not merely a preparatory event, but a valid moment per se, needing no external referent to confirm its inherent relevance to the patient’s life” (Polster & Polster, 1973, p. 5, emphasis in original).

That is, gestalt must be experienced to be understood, which is next to impossible to do via the medium of a book. The closest that one can come in writing is to include rich, descriptive, evocative examples. Sadly, *Gestalt Therapy: A Guide to Contemporary Practice* has none.

The vacuum left by the absence of a current retelling of gestalt therapy has been filled by other approaches that focus on one or more aspects of gestalt therapy. For example, mindfulness-based psychotherapies are proliferating (e.g., Baer, 2006; Germer, Siegel, & Fulton, 2005; Kabat-Zinn, 2005). Helping clients to pay attention to sensory experiences and mental contents in the present moment, deliberately and intentionally, in a nonelaborative and nonjudgmental way is what gestalt therapists have been doing for over 40 years. Similarly, many of today’s therapists are interested in body-oriented psychotherapies (e.g., Frank, 2001; Kurtz, 1990) that draw from the same well as gestalt therapy in seeking to facilitate self-awareness of material remembered in bodily sensations and nonconscious patterns of behaving.

And of course there is Leslie Greenberg’s emotion focused—or process-experiential—therapy (Greenberg, 2002). Greenberg has spent his career empirically testing gestalt therapy and arguing that activating clients’ emotions will trigger concomitant changes in cognitions and behaviors, and that their self-actualizing tendencies will be engaged (Elliott, Watson, Goldman, & Greenberg, 2004). In doing so he has highlighted the vital role of emotions as a primary adaptive motivator in human experience.

None of these approaches captures all that makes gestalt therapy so unique and powerful, however. Each focuses on an aspect of gestalt therapy without appreciating the whole, and the need for a current retelling remains unfulfilled.

Until someone writes such a book, I recommend sticking with the classics (Perls et al., 1951; Polster & Polster, 1973), experiencing gestalt therapy for yourself—ideally through personal therapy or live demonstrations—and watching video recordings of the masters. Those who are interested in contemporary gestalt theory may find *Gestalt Therapy: A Guide*
to Contemporary Practice worth a read, but anyone interested in reading about contemporary gestalt practice will have to wait.

References


